

IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE EASTERN DISTRICT OF VIRGINIA  
RICHMOND DIVISION

FILED  
2009 JUL 13 PM 12:01  
RICHMOND DIVISION

In re:

CIRCUIT CITY STORES, INC.,  
et al.

Chapter 11

Case No. 08-35653 (KRH)

Debtors.

Jointly Administered

**CLAIMANT RICHARD THOMPSON'S WRITTEN RESPONSE AND REQUEST  
FOR HEARING TO NOTICE OF DEBTORS' TWELFTH OMNIBUS  
OBJECTION TO CERTAIN QUALIFIED PLAN CLAIMS AND 401(K) CLAIMS**

**CLAIMANT'S NAME:**

**RICHARD THOMPSON**

**CLAIMANT'S ADDRESS:**

**11313 EDGEWOOD FARM CT.  
RICHMOND, VIRGINIA 23233**

**CLAIMANT'S TELEPHONE #:**

**(804) 747-8878**

**CLAIMANT'S FAX #:**

**No fax number**

**CLAIMANT'S CLAIM #:**

**6405**

**CLAIMANT'S STATEMENT OF WHY BANKRUPTCY COURT SHOULD  
OVERRULE DEBTORS' OBJECTION AS TO CLAIMANT'S CLAIM AND  
DECLARATION OF RELEVANT FACTS THAT SUPPORT THE RESPONSE:**

I, claimant, Richard Thompson object and request a hearing as to the Debtors' Twelfth Omnibus Objection to my Claim #6405, timely filed on January 27, 2009, Exhibit #1 attached hereto, under the Debtors' Qualified Retirement Plan ("Retirement Plan of Circuit City Stores, Inc.") for the following reasons:


I, Richard Thompson, was employed by Circuit City Stores, Inc. from October 19, 1998 to November 3, 2003, in the position of Product Manager, at the Richmond, Virginia Corporate Headquarters, as shown by the attached documentation, Exhibit #2, signed by Eric A. Jonas, Jr., Vice President HR Services for Circuit City Stores, Inc.

As of November 3, 2003, the date I was laid off by Circuit City Stores, Inc., due to a workforce reduction, I was 100% vested in my accrued benefit under the Retirement Plan of Circuit City Stores, Inc., as verified and confirmed by the attached Exhibit #3, Letter dated September 1, 2004 to me from Circuit City Stores, Inc., Retirement Plan Administrative Committee, persons with knowledge of the relevant facts that support this response. My monthly accrued benefit payable for my lifetime and commencing on my Normal Retirement Date of October 30, 2028, is \$296.61, as stated by and confirmed by Circuit City Stores, Inc. Retirement Plan Administrative Committee in Exhibit #3.

Exhibit #3 states: "According to our records, you are 100% vested in your accrued benefit under the Plan. Your monthly accrued benefit payable for your lifetime only and commencing on your Normal Retirement Date will be \$296.61." Exhibit #3 further states: "Generally, the earliest a distribution can be made from the Plan is after a participant reaches Normal or Early Retirement. Early retirement is at least ten years of Benefit Service at termination of employment and age 55, or at least seven years of Benefit Service at termination of employment and age 62. Benefits can start on the first of any month after meeting these requirements."

No legal and/or factual grounds exist to deny me these accrued and fully vested retirement benefits, which I earned and became 100% vested in by working for Circuit City Stores, Inc. from October 19, 1998 to November 3, 1998.

Submitted By:

  
Richard Thompson

I certify I sent via **United States Postal Service Express Mail overnight** this WRITTEN RESPONSE AND REQUEST FOR HEARING TO NOTICE OF DEBTORS' TWELFTH OMNIBUS OBJECTION TO CERTAIN QUALIFIED PLAN CLAIMS AND 401(K) CLAIMS, on **Monday, July 13, 2009**, to the Debtors' Attorneys as follows:

Skadden, Arps, Slate, Meagher & Flom, LLP  
One Rodney Square  
P.O. Box 636  
Wilmington, DE 19899-0636  
Attn: Gregg M. Galardi  
Attn: Ian S. Fredericks

AND

McGuireWoods, LLP  
One James Center  
901 E. Cary Street  
Richmond, VA 23219  
Attn: Dion W. Hayes  
Attn: Douglas M. Foley

AND

Skadden, Arps, Slate, Meagher & Flom, LLP  
333 West Wacker Drive  
Chicago, IL 60606  
Attn: Chris L. Dickerson

COPY

B 10 (Official Form 10) (12/07)

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF VIRGINIA

PROOF OF CLAIM

Debtor against which claim is asserted: (Check only <u>one</u> box below:)		
<input checked="" type="checkbox"/> Circuit City Stores, Inc. (Case No. 08-35653)	<input type="checkbox"/> CC Distribution Company of Virginia, Inc. (Case No. 08-35659)	<input type="checkbox"/> Abbott Advertising, Inc. (Case No. 08-35665)
<input type="checkbox"/> Circuit City Stores West Coast, Inc. (Case No. 08-35654)	<input type="checkbox"/> Circuit City Stores PR, LLC (Case No. 08-35660)	<input type="checkbox"/> Mayland MN, LLC (Case No. 08-35666)
<input type="checkbox"/> InterFAX, Inc. (Case No. 08-35655)	<input type="checkbox"/> Circuit City Properties, LLC (Case No. 08-35661)	<input type="checkbox"/> Pamperco Designs, Inc. (Case No. 08-35667)
<input type="checkbox"/> Ventoux International, Inc. (Case No. 08-35656)	<input type="checkbox"/> Orbyn Electronics, LLC (Case No. 08-35662)	<input type="checkbox"/> Sky Venture Corporation (Case No. 08-35668)
<input type="checkbox"/> Circuit City Purchasing Company, LLC (Case No. 08-35657)	<input type="checkbox"/> Kinzer Technology, LLC (Case No. 08-35663)	<input type="checkbox"/> NSStuff, LLC (Case No. 08-35669)
<input type="checkbox"/> CC Aviation, LLC (Case No. 08-35658)	<input type="checkbox"/> Courchevel, LLC (Case No. 08-35664)	<input type="checkbox"/> PRAHS, INC. (Case No. 08-35670)

NOTE: This form is to be filed with the bankruptcy court. It is not to be filed with the court clerk. The court clerk will file the claim with the bankruptcy court.

Name of Creditor (the person or other entity to whom the debtor owes money or property): <b>THOMPSON, RICHARD</b>	Check this box to indicate that this claim amends a previously filed claim.
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Name and address where notices should be sent:  <b>THOMPSON, RICHARD 11313 EDGEWOOD FARM CT RICHMOND VA 23233</b>	NameID: <b>4823757</b> PackID: <b>309604</b>	Court Claim Number: _____ (If known)
Telephone number: _____	Filed on: _____	

Name and address where payment should be sent (if different from above):  Telephone number: _____	Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.  Check this box if you are the debtor or trustee in this case.
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1. Amount of Claim as of Date Case Filed: <u>\$ 296.61 per month for life from date of early or normal retirement</u> (If all or part of your claim is secured, complete item 4 below, however, if all of your claim is unsecured, do not complete item 4. (If all or part of your claim is entitled to priority, complete item 5. Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.	5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim. Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). Wages, salaries, or commissions (up to \$10,950) earned within 180 days before filing of the bankruptcy petition or cessation of the debtors business, whichever is earlier. 11 U.S.C. § 507(a)(4). <input checked="" type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(9).
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2. Basis for Claim: <u>Vested benefits due from Circuit City Stores, Inc. Retirement Plan</u> (See instruction #2 on reverse side.)
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3. Last four digits of any number by which creditor identifies debtor: <u>3875</u>
3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)

4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or "right of setoff" and provide the requested information. Nature of property or right of setoff: Real Estate Motor Vehicle Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate: _____% Amount of arrearage and other charges as of time case filed included in secured claim. if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____	<input checked="" type="checkbox"/> Amount entitled to priority: \$ _____ *Amounts are subject to adjustment on 4-1-10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
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6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. 7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements or running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See definition of "redacted" on reverse side.) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING (If the documents are not available, please explain: _____)
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Date: <u>1/19/09</u> Signature: the person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.  <u>R J Mc</u>	FOR COURT USE ONLY  JAN 27 2009 KURTZMAN CARSON CONWAY & CO.
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Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571



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EXHIBIT 1



November 3, 2003

To Whom It May Concern:

The purpose of this letter is to advise you that Richard L Thompson was laid off by Circuit City Stores, Inc. on November 3, 2003 when we experienced a workforce reduction.

Richard has been employed by Circuit City from October 19, 1998 to November 3, 2003. At the time of the workforce reduction, Richard held the position of Product Manager.

If you have any questions, please contact our Associate information number at 1-900-555-9675 once you obtain the authorization code from Richard.

Sincerely,

A handwritten signature in black ink, appearing to read "Eric A. Jonas, Jr.", written over a horizontal line.

Eric A. Jonas, Jr.  
Vice President  
HR Services

EXHIBIT 2

**CONFIDENTIAL**



Circuit City Benefits  
P.O. Box 31848  
Charlotte, NC 28202-9902  
T 800.288.6353

September 1, 2004

Mr. RICHARD L. THOMPSON  
11313 Edgewood Farm Ct  
Richmond, VA 23233

**Re: Vested Benefit from the Retirement Plan of Circuit City Stores, Inc. (the Plan)**

Dear Mr. THOMPSON:

The following information addresses your vested benefits under the Retirement Plan of Circuit City Stores, Inc. We encourage you to review it thoroughly and, if you are married, share it with your spouse.

According to our records, you are 100% vested in your accrued benefit under the Plan. Your monthly accrued benefit payable for your lifetime only and commencing on your Normal Retirement Date will be \$296.61.

Your accrued benefit was calculated based on the following information. If any of this information is not accurate, please contact us immediately as your monthly benefits may change based on the correct information.

Date of Birth:	October 30, 1963
Date of Hire:	October 19, 1998
Date of Termination of Employment:	November 3, 2003
Normal Retirement Date:	October 30, 2028
Benefit Service at Termination of Employment:	5 years

Generally, the earliest a distribution can be made from the Plan is after a participant reaches Normal or Early Retirement. Early Retirement is at least ten years of Benefit Service at termination of employment and age 55, or at least seven years of Benefit Service at termination of employment and age 62. Benefits can start on the first of any month after meeting these requirements. If benefit payments commence prior to Normal Retirement, they will be reduced to reflect the longer payout period.

If you are eligible for Early Retirement and wish to start your benefits, please send a written request to the Retirement Plan Administrative Committee at the address shown above.

If you die before your Retirement benefits begin and are survived by a spouse, your spouse will be eligible to receive a monthly benefit for his or her lifetime. If you are not married at the time of your death, no benefits would be paid from this Plan.

Benefits are paid only in accordance with Plan provisions, regardless of any written or oral statements you may have received. If any discrepancies exist between this information and the Plan document, the provisions of the Plan document will govern in all instances.

Please keep us informed of your current address. If you have any questions, please contact the Associate Service Center at (800) 288-6353.

Circuit City Stores, Inc.  
Retirement Plan Administrative Committee

XXX - XX - 0724

EXHIBIT 3